MAIL TO: Office of the Attorney General Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470

STREET ADDRESS: 1300 | Street Sacramento, CA 95814 Telephone: (916) 323-5079

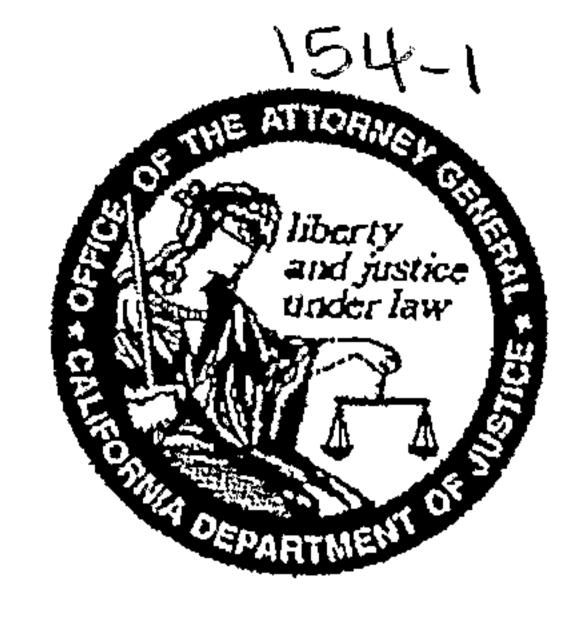
WEB SITE ADDRESS: http://ag.ca.gov/charities/

## COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES

## ANNUAL FINANCIAL REPORT FOR 20 (California Government Code Section 12599)

Failure to file annual financial report by January 30<sup>th</sup> annually for each calendar year of solicitation may result in late fees as defined in Government Code Section 12586.1

An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.



Name and Address of Commercial Fundraiser:	Name and Address of Charitable Organization:
ivaline and Address of Commercial Fandraiser.	
154	CT No. 750-986 F.E.I.N. No. 94-2300109
	ARC OF SONOMA COUNTY
JADENT, INC. PO BOX 881	Name of charity
SALEM, OR 97308	POBOX 219
	Address of charity
	SANTA ROSA CA 95402
	City, State, and ZIP code of charity
Figures from (check one): National Campaign L California Campaign L	
TELEPHONE CAMPAION ineld (on) (from)	1/1,20 <u>03</u> ,to10/31_,20 <u>03</u>
(Type of activity)	(Date or dates must be shown)
is the contract between the commercial fundraiser and charity based upon a fee or pe If other, provide brief explanation	rcentage of revenue? Fee D Percentage 🔀 Other D
1. REVENUE	
A. Cash contributions	56,467.71 A.
B. Entertainment sales or admission charges	B.
C. Sales from products	C.
D. Advertisement sales	D.
E. Membership fees	<u></u> E.
F. Other sources: (Specify)	
a,	Fa.
b.	Fb.
C	Fc.
d	Fd.
G. TOTAL REVENUE	<u>56,467,71</u> G.
2. EXPENSES	
A. Fees or commissions	25.410.47 A.
B. Salaries	10.72893 B.
C. Payroli taxes	
D. Employee benefits	D.
E. Cost of merchandise for resale	E.
F. Cost of entertainment	F.
G. Postage	G.
H. Advertising	H.
I. Telephone	<u>3388.00</u> 1.
J. Rental of equipment	J.
K. Facilities charge	K.
L. Permits	<u> </u>
M. Other expenses: (Specify)	
a	Ma.
b	Mb.
C	Mc.
d	Md.
N. TOTAL EXPENSES	<u> </u>

## 

for which the commercial fundraiser has cont racted t	o'solicit?		
☐ Yes 'No If "yes" complete the following		-	 •
Name of officer, director, partner or owner of commercial fundraiser	Name and address of charitable organization	Relationship of off to charitable orga	-
			· · · · · · · · · · · · · · · · · · ·
			: • : •
(b) For each affiliation identified in 7(a), attach copy of th	e contract between the commercial fundraiser and the cha	arity.	
er penalties of perjury, I declare that I have examined this ref, it is true, correct and complete.	eport, including accompany ing documents, schedules and	i st atements, and to the best	
er penalties of perjury, I declare that I have examined this ref, it is true, correct and complete.			of my knowledge an
ier penalties of perjury, I declare that I have examined this ref, it is true, correct and complete.	report, including accompany ing documents, schedules and こうしょうしょうしょう マック マン・ア・クライ Printed name	st atements, and to the best	of my knowledge an
er penalties of perjury, I declare that I have examined this ref, it is true, correct and complete.  nature of authorized officer (commercial fundralser)	report, including accompany ing documents, schedules and こうしまれる マック からままり Printed name	Istatements, and to the best  PRESIDENT  Title	of my knowledge an
er penalties of perjury, I declare that I have examined this ref, it is true, correct and complete.  nature of authorized officer (commercial fundralser)	report, including accompany ing documents, schedules and こうしょうしょうしょう マック マン・ア・クライ Printed name	Istatements, and to the best  PRESIDENT  Title	of my knowledge an
ier penalties of perjury, I declare that I have examined this ref, it is true, correct and complete.  nature of authorized officer (commercial fundralser)  report must be signed by two officers or directors of the c	report, including accompany ing documents, schedules and a sch	I st atements, and to the best $PRESIDENT$ Title  Title	of my knowledge and

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